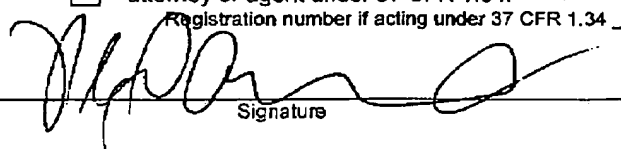


APR 17 2006

PTO/SB/22 (12-04)

|   |            |  |          |
|---|------------|--|----------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2005</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>   |            | Docket Number (Optional) 019524-000420US |          |
| Application Number 10/748,527   |            | Filed December 29, 2003                  |          |
| For METHOD AND APPARATUS FOR SUPPLYING ORBITAL SPACE<br>PLATFORMS USING PAYLOAD CANISTERS VIA INTERMEDIATE<br>ORBITAL RENDEZVOUS AND DOCKING  |            |  |          |
| Art Unit 3641   |            | Examiner Gabriel S. Sukman               |          |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.<br>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): |            |  |          |
|   | <u>Fee</u> | <u>Small Entity Fee</u>                  |          |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$120      | \$60                                     | \$ _____ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$450      | \$225                                    | \$ _____ |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$1020     | \$510                                    | \$ 510   |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1590     | \$795                                    | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2160     | \$1080                                   | \$ _____ |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.  |            |  |          |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |            |  |          |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |            |  |          |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.   |            |  |          |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u> . I have enclosed a duplicate copy of this sheet.                     |            |  |          |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  |            |  |          |
| 04/19/2006 BABRAHA1 00000002 201430 10748527  |            |  |          |
| 02 FC:2253 510.00 DA  |            |  |          |
| I am the <input type="checkbox"/> applicant/inventor.   |            |  |          |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  |            |  |          |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>35,819</u>  |            |  |          |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____  |            |  |          |
| <br>Signature  |            | April 17, 2006<br>Date                   |          |
| Philip H. Albert, Reg. No. 35,819<br>Typed or printed name  |            | 650-326-2400<br>Telephone Number         |          |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |            |  |          |
| <input type="checkbox"/> Total of _____ forms are submitted.  |            |  |          |

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